

Vital Records Division 1151 Taylor Street Detroit, Michigan 48202 (313) 876-4135



APPLICATION FOR A CERTIFIED COPY OF A DEATH CERTIFICATE

(Office Hours: Monday - Friday 8:00 a.m. - 4:00 p.m.)

We are required by Act 368 of 1978 as amended, to collect the statutory fee before a search may be made for any record. Fee schedule is itemized below. Please make money order or certified check payable to the **City of**

Detroit -- PLEASE DO NOT SEND CASH OR PERSONAL CHECK

- Minimum fee for **ONE CERTIFIED COPY** \$17.00
- **ADDITIONAL CERTIFIED COPIES** of the same record ordered at the same time \$5.00
- When exact year is not known and more than a 3 year search is required, remit \$4.00 for each year over the minimum 3 years search.

FEES PAID TO SEARCH THE FILES ARE NOT REFUNDABLE

WHEN A RECORD IS NOT FOUND, THE APPLICANT WILL RECEIVE NOTIFICATION THAT THE RECORD REQUESTED IS NOT ON FILE IN THIS OFFICE.

REQUESTED	IS NOT ON FILE IN TH	IIS OFFICE.		
Please send a	certified copy of the de	PLEASE PRINT ath certificate of:		
Name of dece	eased:			
1 (0.1110 01 0000	(First)	(Middle)	(Last)	
Date of Death	1:			
	(Month)	(Day)	(Year)	
If exact year i	is unknown:	(Years to be searched)		
Dlace of death	··	,		
Place of death: (Township		nship, Village, or City)	(County)	
	Applicant's Signature)	A DOVE IS NOT PROWNlass	(Date)	. dotolh: oh ln
		ABOVE IS NOT KNOWN, pleas parital status, name of husband or v		
L				
PLEASE				
	PRINT YO	OUR NAME AND MAILING A	ADDRESS BELOW:	
	NAME			
	ADDRESS:		Phone	
	CITY:	STATE	ZIP CODE	

Please mail your request to the above address.